# MAINTENANCE AND DOCUMENTATION OF HEARING CONSERVATION TECHNICIAN PROFICIENCY

## I. INTRODUCTION

This short paper outlines a protocol to ensure annual maintenance and documentation of hearing conservation technician (HCT) proficiency. It should be useful for both direct and technical supervisors of HCTs. Per DoDI 6055.12, "A technician who performs audiometric tests shall be responsible to an audiologist, otolaryngologist, or other physician." Immediate supervisors who are neither audiologists nor appropriately trained physicians are advised to consult with these specialists to ensure compliance and effectiveness.

Navy HCTs complete an intensive 4 or 5 day training and certification program which prepares them to work independently and effectively. They are then re-certified within 3 years after an abbreviated block of refresher training. The Joint Commission on Accreditation of Healthcare Organizations (JCAHO) has no specific guidelines for ensuring technician proficiency. JCAHO defers to the discipline-specific supervising body, for instance the Council for Accreditation in Occupational Hearing Conservation (CAOHC) and applicable military organizations such as the NAVENVIRHLTHCEN, to prescribe the appropriate interval and method to maintain/document proficiency. Although many hearing conservation program (HCP) managers already have some sort of HCT proficiency maintenance protocol, the practice is not universal. Here are some reasons why it should be:

- A properly trained, motivated, and equipped HCT is the cornerstone of every HCP.
- There is a significant on-the-job learning component to HCT training.
- It is not uncommon for HCTs to receive their first HCP work assignment several months after being certified. (Use it or lose it applies!)
- Many HCTs, particularly in the Navy, work with minimal technical supervision.
- Anyone who is the direct or technical supervisor of an HCT, or who signs their training
  certificate, puts his or her reputation on the line every time the HCT conducts a hearing
  test and determines appropriate disposition.

## II DOCUMENTATION OF PROFICIENCY

Wherever possible, proficiency evaluation should be accomplished at the technician's work site. The entire procedure need take no more than an hour, and should be accomplished at least annually. The procedures and checklist provided here are neither exhaustive nor necessarily the optimum format for proficiency review, but they are a starting point.

A checklist that may be utilized and retained as documentation of proficiency review is included in this appendix. Four basic areas of performance review are identified:

- administration of hearing tests and tympanometry
- record keeping
- fitting of personal hearing protection
- education/motivation

#### ADMINISTRATION OF HEARING TESTS

Direct observation of a complete patient contact is advised in order to observe status of instrumentation, instructions and patient contact skills, test technique, patient counseling, and disposition. The reviewer may also serve as the patient. At least one manual test should be observed, or administered to the reviewer, in addition to microprocessor testing. Administration and interpretation of tympanometry should be assessed, if applicable. Note that the checklist assumes an expert reviewer, and does not "break down" the components of a procedure.

## RECORD KEEPING/FORMS

This review begins with a quick scan of the unit SOP, Local Operating Manual, and/or Desk Guide. Briefly review DD2217s, listening check sheets, command rosters, and documentation of workload. Regarding DD2215/2216 forms, pulling health records vice review of forms in isolation allows observation of SF513 consults, SF600 entries, and form placement in the record. No minimum sample size is specified, but the reviewer should note the number or approximate % of records/forms sampled. Again, the enclosed checklist may be used.

#### FITTING HEARING PROTECTIVE DEVICES (HPDs)

Confirm an adequate stock of HPDs and a functioning otoscope. Observe an actual fitting, or have the HCT fit you with one or more types of HPDs. Complete the checklist.

#### EDUCATION/MOTIVATION

Technicians who have a significant training role should be observed while conducting training. Where that is impractical, the checklist suggests a format to assess preparation (if not competency) in that role.

#### III. MAINTAINING PROFICIENCY THROUGH IN-SERVICE TRAINING

Create a schedule of in-service dates and topics to keep technicians interested and supervisors involved. For remote sites, training may be administered over the internet, through videotape, or in written format with a few test questions to confirm participation and understanding. Case studies are easy, fun, and informative for trainer and trainee. A pre-test can stimulate interest and identify training deficiencies.

Technician/cert.#:

**Location:** 

**Date**:

## HEARING CONSERVATION TECHNICIAN PROFICIENCY CHECKLIST

(checkmark = observed/ok 1 = see comment #1 blank = not observed)1. Test administration: \_\_\_ instrumentation calibrated/functional \_\_\_ instructions \_\_\_ patient prep/seating \_\_\_ microprocessor technique \_\_\_ manual technique \_\_\_ patient counseling \_\_\_\_ disposition \_\_\_\_ tympanometry Comments: **2. Record keeping/forms**: (Average monthly workload \_\_\_\_\_) \_\_\_\_SOP \_\_\_ current instrux available \_\_\_\_DD2217s \_\_\_\_ listening checks \_\_\_ workload documentation \_\_\_ command rosters \_\_\_ DD2216s (\_\_\_\_ reviewed, \_\_\_\_ errors noted) # health records pulled \_\_\_\_\_ \_\_\_ DD2215s (\_\_\_\_ reviewed, \_\_\_\_ errors noted) Comments: 3. Fitting HPDs: \_\_\_ adequate stock \_\_\_ otoscopy \_\_\_ fitting technique \_\_\_ counseling Comments: 4. Education/Motivation of clients: \_\_\_ training observed for delivery, content, overall effectiveness \_\_\_ not observed, but training effectiveness documented through surveys Comments: 5. Summary, including refresher training requirements:

Reviewer: